

City Of Chattanooga
New Business Application

Remit \$15.00 with this form to complete application. Make Check Payable to "City of Chattanooga" and mail to
101 E. 11th St. Room 100 Chattanooga, TN 37402. Call (423) 643-7262 or email busl@chattanooga.gov for additional information.

Answer all questions below completely. Incomplete and unsigned applications will delay processing.

1. Business FEIN or SSN (required)	2. Start Date for Location in Jurisdiction	3. Fiscal Year End Date
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4. Type of Ownership (choose only one box below):

<input type="checkbox"/> Sole Proprietorship	<input type="checkbox"/> Partnership (all types)	<input type="checkbox"/> Corporation (all types)
<input type="checkbox"/> Marital Joint Ownership Other Spouse's SSN: _____	<input type="checkbox"/> Limited Liability Company (choose one below)	
<input type="checkbox"/> Estate or Trust	<input type="checkbox"/> Multi-Member LLC	<input type="checkbox"/> Single Member LLC

5. Legal Name of Business

6. Primary Address (physical address where records are located; no P.O. box)	City	State	ZIP Code
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7. Identify Owners, Officers, Members, or Partners (Attach additional names on separate sheet if needed. See Instructions.)

Title	Title
SSN of owner or FEIN of owning business, if available	SSN of owner or FEIN of owning business, if available
First and Last Name of Owner or Name of Owning Business	First and Last Name of Owner or Name of Owning Business
Telephone Number with Area Code	Telephone Number with Area Code
Email	Email
Address	Address
City State ZIP Code	City State ZIP Code

8. "Doing Business As" (DBA) Name (if different from #5 above)

9. Classification (select below or write in)

Classification ☐ **Class 1A** ☐ **Class 1B** ☐ **Class 1C** ☐ **Class 1D** ☐ **Class 2** ☐ **Class 3** ☐ **Class 4**

10. License Type

☐ Standard Business License ☐ Minimal Activity License

11. Business Location Address (physical address only; no P.O. box)	City	State	ZIP Code
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<p>16. Signatures Required! This application must be signed by an owner, officer, member or partner of the entity listed above. Do not print or use a stamp.</p> <p>The statements made on this application are true to the best of my knowledge and belief.</p> <p>Signature: _____ Date: _____</p> <p style="text-align: center;"><i>Owner, Officer, Member, or Partner</i></p> <p>Signature: _____ Date: _____</p> <p style="text-align: center;"><i>Owner, Officer, Member, or Partner</i></p>	<p>For Department Use Only</p>
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VISIT www.chattanooga.gov for additional business license information.